



NOTICE OF APPEAL FROM THE PRIMARY EXAMINER
TO THE BOARD OF APPEALS

AF
1636
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Applicants: Hiten D. Madhani and Eric S. Lander

Application No.: 09/439,969 Group: 1636

Filed: November 12, 1999 Examiner: Gerald G. Leffers, Jr.

Confirmation No.: 2363

For: TARGETS OF THE MAP KINASE PATHWAY IN THE
DEVELOPMENTAL SWITCH IN YEAST

#19

CERTIFICATE OF MAILING	
I hereby certify that this correspondence is being deposited with the United States Postal Service with sufficient postage as First Class Mail in an envelope addressed to Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450	
on <u>June 16, 2003</u>	<u>Beverly Weinberger</u>
Date	Signature
<u>Beverly Weinberger</u>	
Typed or printed name of person signing certificate	

Mail Stop AF
Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

Sir:

Applicant hereby appeal to the Board of Appeals from the decision dated January 14, 2003, of the Primary Examiner finally rejecting claims 9, 11, 15 and 19. The item(s) checked below are appropriate:

1. ☒ Applicants hereby petition to extend the time for filing a Notice of Appeal in response to the Office Action Made Final dated January 14, 2003 for two months, from April 14, 2003 to June 14, 2003.
2. ☐ A [] month extension of time to respond to the Office Action Made Final dated [] was filed on [] with payment of a \$[] fee.

 ☐ Applicant hereby petitions for an additional [] month extension of time to respond to the Office Action Made Final.
3. ☐ A Request for Oral Hearing before the Board of Patent Appeals and Interferences is being filed concurrently herewith.

06/19/2003 RNDNDAF1 00000053 09A39969
320.00 BP
410.00 BP
01 FC:1401
02 FC:1252

4. Fees are submitted for the following:

<input checked="" type="checkbox"/> [X]	Extension of Time for two months		\$	410.00
<input type="checkbox"/> []	Additional Extension of Time:			
	Fee for Extension	([] mo.)	\$	
	Less fee paid	([] mo.)	- \$	
	Balance of fee due		\$	0
<input checked="" type="checkbox"/> [X]	Notice of Appeal		\$	320
<input type="checkbox"/> []	Other		\$	
		TOTAL	\$	730

5. The method of payment for the total fees is as follows:

☒ A check in the amount of \$730 is enclosed.

☐ Please charge Deposit Account No. 08-0380 in the amount of \$[].

Please charge any deficiency or credit any overpayment in the fees that may be due in this matter to Deposit Account No. 08-0380. A copy of this document is enclosed for accounting purposes.

Respectfully submitted,

HAMILTON, BROOK, SMITH, REYNOLDS, P.C.

By _____

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Date:

4/16/03